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MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEETSubstitute for Form PTO-1360  
(For use with Form PTO/SB/06)

7-8-05

Application Number  
09/534,960

Filing Date

Applicant(s)

May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
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49						
50						
Total Indep						
Total Depend						
Total Claims						

CLAIMS	3-15-04		7-8-05		Indep	Depend
	Indep	Depend	Indep	Depend		
51						
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92						
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94						
95						
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97						
98						
99						
100						
Total Indep						
Total Depend						
Total Claims						

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450; Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							Application Number <i>09/534,960</i>	Filing Date				
							Applicant(s)					
<i>7-8-05</i>							May be used for additional claims or amendments					
CLAIMS	AS FILED <i>375-04</i>		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
101		1		1			51					
102							52					
103							53					
104							54					
105							55					
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48							98					
49							99					
50							100					
Total Indep	5		5				Total Indep					
Total Depend	38	34					Total Depend					
Total Claims	39	39					Total Claims					

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